## **MEMORANDUM**

TO: Health Officers CCPC HO Memo #15-11

**CRF Cancer Program Coordinators** 

**FROM:** Cindy Domingo, Program Manager

Cigarette Restitution Fund Programs Unit

**DATE:** May 1, 2015

**RE:** Fiscal Year 2016 Grant Application Instructions for the Cigarette Restitution

Fund Cancer Prevention, Education, Screening and Treatment Program

Attached are instructions for submitting your Cigarette Restitution Fund Program (CRFP) Cancer Prevention, Education, Screening and Treatment (CPEST) Program grant application for Fiscal Year (FY) 2016. The overall budget for the CRFP public health cancer grants in FY 2015 is level funded from last FY. The amount of funding for each jurisdiction in FY 2016, based on the CRFP cancer formula (with a base amount of \$100,000 for each jurisdiction and 5 year averages for cancer incidence and mortality for the targeted cancers), is listed in Attachment I. Since our overall budget is level funded, the differences in local funding from last year are due to the difference in the relative proportions of new cases or deaths among the jurisdictions. **Please submit your CRFP CPEST Program application to DHMH by June 1, 2015.** 

It is important to note that all future funding is subject to legislative appropriations each year and all fund recipients are responsible for notifying all subgrantees, subvendors, or subcontractors of this condition.

There are **two major changes** in the FY 2016 application compared to the previous year's application. These include the addition of Patient Navigation in the short term goals, cancer screening goals, and diagnosis and treatment goals sections of the grant narrative. Additionally, educational and outreach activities are requested to be submitted in a new separate attachment 3A. Please ensure that you respond to these additions and related requests for information in this application.

Legislative requirements state that, "A county or a statewide academic health center shall dedicate at least **60%** of the funds to cancer screening, diagnosis and treatment." Additional guidance for this legislative requirement is found in Appendix 1 (Attachment 10).

The combined expenditures for advertisement, marketing, educational supplies, and/or websites, regardless of the line item in FC01N are to be limited to no more than **15% of the FC01N budget**. Within the 15%, increase the funding for engagement of ethnic and racial minorities to conduct education and outreach activities.

The information requested in your grant application is based on the information required by the CRFP statute. The targeted cancers under the CRFP for FY 2016 will remain the same as those identified previously and include cancers of the lung and bronchus, colon and rectum, breast, prostate, cervix, skin (melanoma), and oral cavity. Your program must "declare" any one or more of these cancers in your grant application and based upon the cancers declared, specify whether you will provide education, screening, diagnosis and treatment services, and patient navigation with the CRF-CPEST funds. Note that Patient Navigation can only be declared for colorectal cancer. Programs funded to provide screening for breast and cervical cancer may also indicate performance measures for patient navigation of these cancers.

Prior to e-mailing your application to us, please ensure that all of the necessary components of your application are attached to the e-mail. A checklist has been prepared to help you assemble the components of your grant application (Attachment 2). **Complete the checklist and incorporate with your application submission.** 

Please send your applications electronically to: <u>FHAUGA-CRF-Cancer@dhmh.state.md.us</u>. When you e-mail your application, please complete the subject line as in the following example: 16-CARROLL-FC01N-CH533CPE.

When sending your application electronically, please send each attachment in a separate file as outlined in the chart below. If your documents are large, you may send them in two e-mails with the subject line labeled as **part 1 of 2**, etc.

Attachments for Submission	Naming Convention
Attachment 2: Checklist	FY15-County-Att2-Checklist
<b>Attachment 3</b> : Grant Application Instructions	FY15-County-Att3-GrantApplicationInstructions
<b>Attachment 3A:</b> Educational and Outreach	FY15-County-Att3A-EducationOutreachActivities
Activities	
<b>Attachment 4</b> : Community Health Coalition	FY15-County-Att4-CHCAttestationLetter-Base Year
Attestation Letter-Base Year Funding	Funding
<b>Attachment 5</b> : Inventory of Publicly Funded	FY15-County-Att5-Inventory of Publicly Funded
Cancer Programs As of the End of FY 2013	Cancer Programs As of the End of FY 2013
Attachment 6A: Budget Summary	FY15-County-Att6A-BudgetSummary
Attachment 7A: FC01N Budget Justification	FY15-County-Att7A-BudgetJustification-FC01N
Attachment 7B: FC02N Budget Justification	FY15-County-Att7B-BudgetJustification-FC02N
Attachment 7C: FC03N Budget Justification	FY15-County-Att7C-BudgetJustification-FC03N
<b>Attachment 9</b> : Financial Eligibility Criteria for	FY15-County-Att9-FinancialEligibilityTreatment
Cancer Treatment Services	
Attachment 10: Persons and Organizations	FY-15 PersonsAndOrganizations
Additional Attachments (Label Forms,	FY15-County-GrantAtt-11A,etcTitle of document
Policies, consent, etc. as Attachment 11A, 11B	
etc.,)	

On July 10, 2003, the Division of Program Cost and Analysis provided each local health department with the "Local Health Department Funding System Manual" that must be used in the preparation of the FY 2016 budget. The manual and associated electronic forms are available respectively on the DHMH web page at: <a href="http://dhmh.maryland.gov/SitePages/sf">http://dhmh.maryland.gov/SitePages/sf</a> gacct.aspx, Fiscal Service Administration, Contract Forms Commonly used by Human Service Providers, LHD Electronic UGA Budget Submission for 2016.

Thank you in advance for your cooperation in preparing the grant application. If you have any questions, please feel free to contact me at (410)767-5123.

Attachments: (Electronic copies of all attachments are being e-mailed to CRF/Cancer Coordinators, CRF-CPEST Programs, and Health Officers.)

cc: D. Gugel

S. Hokenmaier

C. Lewis

M. Spencer

File